

Application for Gubernatorial Appointment To a Board or Commission

- This is only an application. No appointment is official without a letter of appointment from the Governor.
- Applicants are strongly encouraged to attach a current resume or biography.
- Specifically list the names of the boards or commissions to which you are applying (multiple selections are allowed).
- Return application along with your resume to:

Attn: Boards and Commissions, Office of the Governor, State House Room 206, Indianapolis, Indiana 46204

The completed application may also be faxed to (317) 232-3443; attention Boards and Commissions.

Board(s) or Commission(s) for which you would like to be considered: Name and address: Business Address: Home Address: Business Phone: Home Phone: Home Fax: Business Fax: Business E-mail: Home E-mail: Congressional State House and District: Senate Districts: Are you registered to vote in the State of Indiana? ☐ Yes ☐ No Are you a citizen of the United States? ☐ Yes ☐ No Political Affiliation: \Box D \square R Have you ever been convicted of or charged with a crime or offense? (Do not include traffic offenses for which the fine was less than \$200.) ☐ Yes ☐ No If so, please attach particulars.

*A yes answer does not automatically disqualify you from an appointment. Education (high school, name and location of college or university, year graduated, and degree):

Current employment (job title, em	ployer, employment date, co	ontact, phone):
Professional licenses held:		References (name, title, contact phone number): 1.
		2.
		3.
Previous employment or experien	ce relevant to board or com	mission sought:
Memberships in professional or c	ivic organizations (please in	nclude offices held and dates of terms):
name and year(s) served:	90.0	ission? If so, please provide the board or commission
Personal Information:		
NOTE: Governor Kernan desires a broathis goal and is voluntary on your part.	ad representation of backgrounds	s on boards and commissions. The information below will assist in
Of what race or ethnicity do you conside	er yourself to be?	
☐ Black/African-American☐ Asian or Pacific Islander American☐	□ White/Caucasian□ American Indian	☐ Latino(a), Hispanic, or Spanish?
☐ Other Race, ethnic background, or nationality:		If you are Latino(a), Hispanic, or Spanish, please check one box below:
☐ Female ☐ Male	Date of Birth:/	Mexican, Mexican-American, Chicano
Do you possess any foreign language s		☐ Cuban
		Enter group, such as Colombian, Dominican, etc.
Have you ever been on active duty in th		
Branch of service:	Highest rank achieved:	
Signature:		Date://